## Crosswalk ACGME Program Criteria and APRN Program Criteria

| ACGME                       | NTF                          | COA                                       | ACME                     |
|-----------------------------|------------------------------|---|--------------------------|
| I. Institutions             | I. Organization &            | A. Conducting Institution                 | I. Organization &        |
| A. Sponsoring Institution   | Administration               | Standards                                 | Administration           |
| B. Participating sites      | A. NP Program Director       | <ol> <li>Faculty support &amp;</li> </ol> | A. Commitment to Program |
|                             | B. Clinical Faculty          | protected time                            | B. Sufficient Resources  |
|                             | C. Institutional Support     | 2. Financial and                          | C. Scholarly and         |
|                             |                              | Physical Resources                        | Professional Pursuits    |
|                             |                              |   | D. Program Director      |
|                             |                              |   | E. Academic Policies     |
| II. Program Personnel and   | II. Students                 | B. Faculty Standards                      | II. Faculty & Faculty    |
| Resources                   | A. Admission criteria        | 1. Program                                | Organization             |
| A. Program Director         | B. Progression & Completion  | Administrator                             | A. Program Faculty       |
| criteria and role /         | Criteria                     | 2. Asst. Program                          | Qualifications           |
| responsibilities            |                              | Administrator                             | B. Clinical Competence   |
| B. Faculty criteria         |                              | 3. CRNA and non-                          | C. Core Program faculty  |
| C. Program Resources        |                              | CRNA Faculty                              | Responsibilities         |
| III. Residency Appointments | III. Curriculum              | C. Student Standards                      | III. Students            |
| A. Residency Program        | A. Development, Evaluation   | 1. Selection &                            | A. Program Admission     |
| Requirements                | & Revision                   | Admissions                                | Criteria                 |
| B. Number of Residents      | B. Curriculum Congruency     | 2. Student                                | B. Student Policies &    |
| C. Resident Transfers       | with National Population-    | Participation &                           | Procedures               |
| D. Appt. of Fellows         | Foci Standards               | Conduct                                   | C. Student Evaluation    |
|                             | C. Curriculum Meets          |   | D. Students' Rights &    |
|                             | Certification Eligibility    |   | Responsibilities         |
|                             | Standards                    |   |                          |
|                             | D. Course Sequencing         |   |                          |
|                             | E. Post-Graduate Certificate |   |                          |
|                             | Students                     |   |                          |
| IV. Educational Program     | IV. Resources, Facilities &  | D. Graduate Standards                     | IV. Curriculum & Student |
| A. Curriculum               | Services                     | <ol> <li>Patient Safety</li> </ol>        | Learning                 |

| Requirements B. Residents' Scholarly Activities C.  | <ul> <li>A. Institutional Resources, Facilities and Services support ALL aspects of the program.</li> <li>B. Sufficient Number of Faculty, Clinical Settings &amp; Clinical Preceptors</li> </ul>                                       | <ol> <li>Peri-anesthesia</li> <li>Critical Thinking</li> <li>Communication</li> <li>Leadership</li> <li>Professional Role</li> </ol> | A. Curriculum Philosophy, Mission & Objectives/Outcomes B. Curriculum Development C. Standards for Student Preparation D. Components of Program & Curriculum  |
|---|---|--|---|
|   |   |  | E. Communication F. Curriculum Conforms to State & National Standards of Care   |
| V. Evaluation A. Resident Evaluation B. Faculty Evaluation C. Program Evaluation & Improvement  | V. Faculty A. Faculty Expertise, Licensure & National Certification B. Faculty Competence & Clinical Practice C. Non-NP Faculty   | E. Curriculum Standards 1. DNP or DNAP degree 2. Scope of Curriculum 3. Clinical Curriculum 4. Simulation                            | V. Resources A. Faculty & Staff B. Physical Resources C. Learning Resources   |
| VI. Learning & Working Environment E. Patient Safety, Quality Improvement, Supervision, and Accountability F. Professionalism G. Well-Being H. Fatigue Mitigation E. Clinical Responsibilities, Teamwork, and Transitions of Care | VI. Evaluation A. Evaluation Plan for Program & Courses B. Student Progress Evaluation C. Student Attainment of Competencies D. Preceptor & Clinical Site Evaluation E. Formal Curriculum Evaluation F. Evaluation of Graduate Outcomes | F. Clinical Site Standards 1. Sufficient Resources 2. Supervision in Clinical Sites 3. Supervision Ratios                            | VI. Assessment & Outcomes A. Comprehensive Plan for Evaluation B. Evaluation of Students & Graduates C. Evaluation from External Constituents D. Evaluation Data Collection and Use E. Faculty Evaluation |

| F. Clinical Experience & Education |   |  |
|------------------------------------|---|--|
|                                    | <ul><li>G. Policy Standards</li><li>1. Accurate records</li><li>2. Transparency in</li></ul>  |  |
|                                    | Policies 3. Procedures for Student discipline / Dismissal   |  |
|                                    | H. Evaluation Standards 1. Continuous Plan for Self-Assessment 2. Student Evaluation of Program, Curriculum, Courses 3. Faculty Evaluation 4. Alumni Evaluation 5. Outcome Measures 6. Use of Evaluation Data |  |

**ACGME** = Accreditation Council for Graduate Medical Education (2016)

(http://acgme.org/Portals/0/PFAssets/ProgramRequirements/CPRs\_2017-07-01.pdf)

NTF = National Task Force Criteria for Evaluation of Quality Nurse Practitioner Education 5th ed. 2016

(http://c.ymcdn.com/sites/www.nonpf.org/resource/resmgr/Docs/EvalCriteria2016Final.pdf)

COA = Council on Accreditation of Nurse Anesthesia Educational Programs (2017)

(http://home.coa.us.com/accreditation/Documents/Standards%20for%20Accreditation%20of%20Nurse%20Anesthesia%20Programs%20-%20Practice%20Doctorate,%20rev%20May%202017.pdf)

ACME = Accreditation Commission for Midwifery Education (2015)

(http://www.midwife.org/ACNM/files/ccLibraryFiles/Filename/000000006672/CriteriaforProgrammaticAccreditationofMidwiferyEducationPrograms(June2013April2015)updatedpassrateinstructionsforclarityJune2016\_June2017.pdf)